



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Re Patent Application of:

Yueh, et al.

Examiner: Amanda C Walke

Application No.: 10/750,042

Art Unit: 1752

Filed: 12/30/2003

For: A low outgassing and non-crosslinking series of polymers for EUV Negative Tone Photoresists

AMENDMENT

Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed December 14, 2004, Applicant respectfully requests the Examiner to enter the following amendments and consider the following remarks:

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage in an envelope addressed to the Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450

on April 25, 2005
Date of Deposit
Conny Willesen
Name of Person Mailing Correspondence
Conny Willesen 4-25-05
Signature Date

06/01/2005 00000004 02555 10750042

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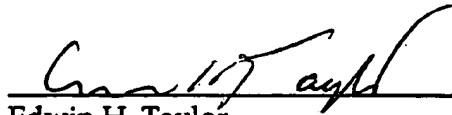
Applicant's claim 10 illustrates a negative tone photoresist. Yoon et. al does not disclose a negative tone photoresist, let alone the specific chemical structure illustrated in claim 10.

Therefore, since claims 2-9, 12-29, and 31-32 depend from claims 1, 11, and 30, applicant respectfully submits that they are also in condition for allowance for at least the same reasons stated above.

If there are any additional charges, please charge Deposit Account No. 02-2666. If a telephone interview would in any way expedite the prosecution of the present application, the Examiner is invited to contact Edwin H. Taylor at (408) 720-8300.

Respectfully submitted,
BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP

Dated: 4/25, 2005


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PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

42P18259

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	28	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	28 minus 20 =	* 8
INDEPENDENT CLAIMS	3 minus 3 =	-
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY
TYPE ☐

RATE	FEE
BASIC FEE	385.00
XS 9=	
X43=	
+145=	
TOTAL	

OR OTHER THAN
SMALL ENTITY

RATE	FEE
BASIC FEE	770.00
XS18=	144
X86=	
+290=	
TOTAL	914

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 31	Minus ** 28	= 3
Independent	* 4	Minus *** 3	= 1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY

RATE	ADDI- TIONAL FEE
XS 9=	
X43=	
+145=	
TOTAL ADDIT. FEE	

OR OTHER THAN
SMALL ENTITY

RATE	ADDI- TIONAL FEE
XS18=	150
X86=	200
+290=	
TOTAL ADDIT. FEE	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDI- TIONAL FEE
XS 9=	
X43=	
+145=	
TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE
XS18=	
X86=	
+290=	
TOTAL ADDIT. FEE	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDI- TIONAL FEE
XS 9=	
X43=	
+145=	
TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE
XS18=	
X86=	
+290=	
TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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